#### FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 14 00090476 3 COMMITTEE NAME **OFFICE USE ONLY** Our Mobility Our Future Date Received **ELECTRONICALLY FILED** 07/15/2020 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 6020 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78762 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Baylor NAME NICKNAME LAST **SUFFIX** A. Jo STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1101 Navasota STREET **ADDRESS** #2 (Residence or Business) Austin, TX 78702 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 413-4276 **PHONE** REPORT January 15 30th day before election Exceeded \$500 Limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Year Day **COVERED THROUGH** 06/30/2020 01/27/2020 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/03/2020 χ General Special

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Comn	nission Filers)
Our Mobility Our Future			00090476		
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME			
(Attach lists on plain paper to complete this report if necessary.)	Candidate				
терит п песеѕѕагу.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	D (officeholder)		
SUPPORT					
(Candidate or Measure)		BALLOT IDENTIFICATION / #		ON DATE	
X OPPOSE		NA	Month 11/03/2	Day 2020	Year
(Candidate or Measure)	X Measure		,,		
ASSIST (Office helder)	Micasure	DESCRIPTION			
(Officeholder)		Transportation funding measure by City	of Austin		
15 CONTRIBUTION TOTALS		   FRIBUTIONS OF \$50 OR LESS (OTHER THAI   ES OF LOANS), UNLESS ITEMIZED	N PLEDGES,	\$	\$0.00
	2. TOTAL POLITICAL CO	ONTRIBUTIONS			
	(OTHER THAN PLEDGES	S, LOANS, OR GUARANTEES OF LOANS)		\$	\$98,620.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPE	NDITURES OF \$100 OR LESS, UNLESS ITE	MIZED	\$	\$0.00
	4. TOTAL POLITICAL EX	(PENDITURES		\$	\$41,666.47
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTREPORTING PERIOD	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	\$	\$46,933.53
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	UNT OF ALL OUTSTANDING LOANS AS OF G PERIOD	THE LAST	\$	\$0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of per and correct and includes all informatio Title 15, Election Code.			
			or A. Jo		
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Ca	mpaign Treasur	er	
Sworn to and subscribed	before me, by the said	, t	his the		_ day
		, witness my hand and seal of office.			
Signature of officer add	ministering oath Print	ed name of officer administering oath	Title of office	er administeri	ng oath

### **SUBTOTALS - SPAC**

### FORM SPAC COVER SHEET PG 3 3 of 14

	MMITTE	<b>18</b> Filer ID 00090476	(Eth	ics Commission Filers)			
Our Mobility Our Future 00090476							
	ME OF			SUBTOTAL AMOUNT			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	78,620.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	75,000.00		
4.	X	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$	20,000.00		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$			
6.	Х	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	ORGANIZATION	\$	10,000.00		
7.		SCHEDULE E: LOANS		\$			
8.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	41,666.47		
9.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
10.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
11.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
12.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$			
13.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	5,000.00		
14.		\$					
				•			

MONETARY POLITICAL CONTRIBUTIONS							SCHEDULE A1			
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/14			
2	FILER NAME Our Mobility	Our Future				3	Filer ID (Ethics Commission 00090476	on Filers)		
4			7	Amount of Contribution (\$)	\$500.00					
0	Dringing aggr	Austin, TX 78731	5)	0	Employer (See Instructions	<u></u>				
8	retired	pation / Job title (See Instruction:	5)	9	Employer (See Instructions retired	»)				
	Date Full name of contributor out-of-state PAC (ID#:)  06/18/2020 Bury III, Paul  Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$1,000.00			
	Principal occu	Austin, TX 78703  pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u> s)				
	retired	,	,		retired					
Date Full name of contributor out-of-state PAC (ID#:_02/18/2020 Daugherty, Gerald  Contributor address; City; State; Zip Code			)		Amount of Contribution (\$)	\$4,000.00				
		Austin, TX 78735								
	Principal occu elected offici	pation / Job title (See Instructionsial	5)		Employer (See Instructions Travis County	s)				
	Date Full name of contributor out-of-state PAC (ID#:)  04/18/2020 Daugherty, Gerald  Contributor address; City; State; Zip Code  Austin, TX 78735			Amount of Contribution (\$)	\$5,000.00					
	Principal occu elected offici	pation / Job title (See Instructionsial	5)		Employer (See Instructions Travis County	5)				
Date O4/20/2020  Daugherty, Gerald  Contributor address; City; State; Zip Code  Austin, TX 78735		•	Amount of Contribution (\$)	\$5,000.00						
	Principal occu elected offici	pation / Job title (See Instructionsial	5)		Employer (See Instructions Travis County	5)				

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/14			
2	FILER NAME Our Mobility	Our Future			3	Filer ID (Ethics Commission 00090476	on Filers)		
4	Date 02/25/2020	<ul> <li>5 Full name of contributor Hardeman, Bryan</li> <li>6 Contributor address; City; Sta</li> <li>Austin, TX 78752</li> </ul>	out-of-state PAC (ID#: ite; Zip Code	)	7	Amount of Contribution (\$)	\$20,000.00		
8	Principal occu self-employe	pation / Job title (See Instructions)		Employer (See Instructions self-employed	)				
	Date Full name of contributor out-of-state PAC (ID#:)  Hill, Rae  Contributor address; City; State; Zip Code  Austin, TX 78703				Amount of Contribution (\$)	\$5,000.00			
	Principal occu housewife	pation / Job title (See Instructions)		Employer (See Instructions none	)				
Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$100.00				
	Principal occu	The Woodlands, TX 77381 pation / Job title (See Instructions) cil		Employer (See Instructions Ventures Oxides LLC	)				
Date Full name of contributor out-of-state PAC (ID#:)  02/13/2020 Lewis, John  Contributor address; City; State; Zip Code  Austin, TX 78746		,		Amount of Contribution (\$)	\$4,000.00				
	Principal occu investments	pation / Job title (See Instructions)		Employer (See Instructions John Lewis Company	)				
Date Full name of contributor out-of-state PAC (ID#:)  102/18/2020 Lewis, John  Contributor address; City; State; Zip Code  Austin, TX 78746			Amount of Contribution (\$)	\$20,000.00					
	Principal occu investments	pation / Job title (See Instructions)		Employer (See Instructions John Lewis Company	)				
			•						

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 6/14	
2	FILER NAME Our Mobility			3	Filer ID (Ethics Commissi 00090476	on Filers)
4	Date 02/14/2020	5 Full name of contributor out-of-state PAC (ID#:_Skaggs, Jim 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$6,000.00
		Austin, TX 78746				
8	Principal occu retired	upation / Job title (See Instructions)	9 Employer (See Instructions retired	s)		
	Date 04/21/2020	Full name of contributor out-of-state PAC (ID#: Skaggs, Jim Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$8,000.00
	Principal occu	Austin, TX 78746 upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/15/2020	Full name of contributor out-of-state PAC (ID#:_Xie, Xi  Contributor address; City; State; Zip Code  Austin, TX 78732			Amount of Contribution (\$)	\$20.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		

PLEDO	GED CONTRIBUT	TIONS			SCHEDULE B
The	Instruction Guide exp	1 Total pages Schedule B: Sch: 1/1 Rpt: 7/14			
2 FILER NAM	E y Our Future			3 Filer ID (Eth 00090476	ics Commission Filers)
4 TOTAL O	F UNITEMIZED PLEDG	ES		\$	0.00
5 Date	6 Full name of pledgor McCall, John	out-of-state PAC (ID#:	)	8 Amount of pledge (\$)	9 In-kind description (If applicable)
06/29/2020	7 Pledgor Address;	City; State; Zip Code		\$24,000.00	 
	Spicewood, TX 78669			Check if travel outs	iside of Texas. Complete Schedule T.
10 Principal occ Retired	Cupation / Job title (See Instruc	ctions)	11 Employer (See Instru	uctions)	
<b>5</b> Date	6 Full name of pledgor	out-of-state PAC (ID#:	)	8 Amount of	9 In-kind description
	Roberts, Roger			pledge (\$)	(If applicable)
06/23/2020	7 Pledgor Address;	City; State; Zip Code		\$1,000.00	 
	Pompeo Beach, FL 33	062		Check if travel outs	i side of Texas. Complete Schedule T.
10 Principal occ Retired	Cupation / Job title (See Instruc	ctions)	11 Employer (See Instru Retired	uctions)	
5 Date	6 Full name of pledgor	out-of-state PAC (ID#:_	)	8 Amount of	9 In-kind description
	Roberts, Vicki			pledge (\$)	(If applicable)
06/30/2020	7 Pledgor Address;	City; State; Zip Code		\$50,000.00	 
	Austin, TX 78746			Check if travel outs	side of Texas. Complete Schedule T.
10 Principal occ retired	cupation / Job title (See Instruc	ctions)	11 Employer (See Instruction retired	uctions)	

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

### SCHEDULE C1

	The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule C1: Sch: 1/1 Rpt: 8/14				
2	FILER NAME		3 Filer ID (Ethics Commission Filers)				
	Our Mobility	Our Future	00090476				
4	Date	5 Corporation / Labor Organization name	7 Amount of contribution (\$)				
	02/28/2020	Charles Maund Toyota	\$10,000.00				
		6 Corporation / Labor Organization address; City; State; Zip Code					
		Austin, TX 78767					
Г	Date	Corporation / Labor Organization name	Amount of contribution (\$)				
	06/23/2020	STEJO Investments LP	\$10,000.00				
		Corporation / Labor Organization address; City; State; Zip Code					
l		Austin, TX 78746					

		R ORGANIZATION	SCHEDULE D
	The Instru	uction Guide explains how to complete this form.	1 Total pages Schedule D: Sch: 1/1 Rpt: 9/14
2	FILER NAME	Our Future	3 Filer ID (Ethics Commission Filers) 00090476
<b>4</b> Date 06/29/2020		Corporation / Labor Organization Name     Brown Distributing Co.     Corporation / Labor Organization address; City; State; Zip Code	7 Amount of pledge (\$)   8 In-kind description (if applicable)   \$10,000.00
		Austin, TX 78724	Check if travel outside of Texas. Complete Schedu

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
-	Total pages Cabadula F1:		2 Filer ID (Ethios Commission Filers)
1	Total pages Schedule F1: Sch: 1/4 Rpt: 10/14	Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4	Date	5 Payee name	•
	04/01/2020	Borgelt, Roger	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$850.00	614 S. Capital of Texas Hwy	
		Austin, TX 78746	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE		, TX, officeholder living expense
		legal services	s rendered for campaign and election
		matters	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
	Date	Payee name	
	03/15/2020	Bronson, Jonathan	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	3809 Rockledge Dr	
		Austin, TX 78731	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	J Salaries/ Wages/ Cortifact Eabor	outside of Texas. Complete Schedule T.
	2/11/21/01/12	,	, TX, officeholder living expense
		Videography	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
H	Date	Payeo namo	
		Payee name	
	04/15/2020	Bronson, Jonathan	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	3809 Rockledge Dr	
		Austin, TX 78731	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	, TX, officeholder living expense
		Videography	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)				
		_			ue explains now t	o com	piete triis ioriii.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/4 Rpt: 11/14		Our Mobility	Our Future					00090476	
4	Date	5	Payee name					'		
	03/09/2020		Flexicodes							
Ļ		┞		0''	0: : 7'					
6	Amount (\$)	7	Payee address		State; Zip	Coae	9			
	\$5,000.00		18650 W. O	ld US 12						
			1							
			Chelsea, MI	48118						
8	PURPOSE	(a)	Category	e Categories listed at the	top of this ashadula	(t	Description			
	OF	``		ges/Contract Lal		`			de of Texas. Con	nplete Schedule T.
	EXPENDITURE		Salaries/ Wa	iges/contract Lai	501				officeholder livin	
							Web devel	lopme	ent	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	sough	nt		Office h	eld
	expenditure to benefit C/OF	Н								
H	Date	Π	Payee name							
	05/12/2020		Magnuson,	Dillon						
	Amount (\$)	┝	Payee addres		State; Zip	Code				
	\$243.52		513 S Park		State, Zip	Couc	•			
	Φ243.52			וטו						
			Unit #304							
			Austin, TX 7	78704						
	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this schedule)	(k	Description			
	OF EXPENDITURE			ges/Contract Lal			Check if tra	avel outsi	de of Texas. Con	nplete Schedule T.
	LAFENDITORE						ш		officeholder living	
							Photograp	hy/ima	age licensin	g
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	sough	nt		Office h	eld
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	02/15/2020		Moreland Co	onsultina						
		$\vdash$			Ctata: 7in	Code				
	Amount (\$)		Payee addres		State; Zip	Coue	=			
	\$6,427.20		5202 Woodi	moor Dr						
			Austin, TX 7	8721						
	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this schedule)	(k	Description			
	OF EXPENDITURE		Consulting E				Check if tra	avel outsi	de of Texas. Con	nplete Schedule T.
	EXPENDITORE						_		officeholder living	
							Consulting	g servi	ces rendere	ed
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	sough	nt		Office h	eld
	expenditure to benefit C/OI	H								
Н										
l										

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

oursement Solicitation/Fundraising Expense
Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
L	Sch: 3/4 Rpt: 12/14	Our Mobility Our Future 00090476
4	Date	5 Payee name
	03/02/2020	Moreland Consulting
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$6,000.00	5202 Woodmoor Dr
		Austin, TX 78721
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Consulting services rendered
		Consulting Services refluered
Ļ	Operation ONLY if dispert	Occasional Office health and a second of the
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
l	04/01/2020	Moreland Consulting
	Amount (\$)	Payee address; City; State; Zip Code
l	\$6,000.00	5202 Woodmoor Dr
		Austin, TX 78721
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		consulting services rendered
L	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
l	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
┡		
l	Date	Payee name
L	05/06/2020	Moreland Consulting
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$3,795.75	5202 Woodmoor Dr
l		
		Austin, TX 78721
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
1		consulting services rendered
$\vdash$	Complete ONE V if direct	Condidate/Officeholder name Office country
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
ldash		
_		

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/4 Rpt: 13/14	Our Mobility Our Future 00090476
4	Date	5 Payee name
	06/02/2020	Moreland Consulting
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6,000.00	5202 Woodmoor Dr
		Austin, TX 78721
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		consulting services rendered
		ochounting convictor tentaction
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	03/07/2020	Shack, Edward
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	4410 Bellvue Ave
		Austin, TX 78756
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		legal services rendered for campaign and election
		matters
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/27/2020	Voices of Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	108 Wild Basin Rd S
		Unit 250
		Austin, TX 78746
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation to Voices of Austin
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Superiord to benefit 0/01	•

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE |

The Instruction Guide explains how to complete this form.
2 FILER NAME Our Mobility Our Future  3 Filer ID (Ethics Commission Filers) 00090476
5 Payee name Lewis, John
7 Payee Address; City; State; Zip 3839 Bee Cave Road Suite 204 Austin, TX 78746
(a) Category (See instructions for examples of acceptable categories)  Donation Partial Refund  (b) Description (See instructions regarding type of information required.)  Donation Partial Refund